## **Terre Haute Parks & Recreation Department Memorial Run/Walk**

Deming Park-Terre Haute May 30, 2016



5K Run or Walk 1 Mile Fun Run

JK Kull Of Walk								Wille Full Rull	
	P.A	RTICIPANT	INFORM	ATIO	N				
Last Name:			First Name:						
Address:			Contact Number:						
City:		State:		ļ			Zip:		
Date of Birth:			Age on race day:				Male	Female	
Email address:			•			•			
Emergency Contact Name:			Emergency Contact Phone Number:						
T-shirt size (circle one):	Youth: S	M L	Adult:	S	M L	XL	XXL		
Shirt	s will only he a	uaranteed ta	n runners i	enist	ered hv	May 1	8th		
Shirts will only be guaranteed to runners registered by May 18th.  RACE INFORMATION									
8:40 AM- 1 Mile Run/Walk Youth (12 years and under) \$15									
Adult (Pre-registi					\$20	H			
Adult (Day of regis					, \$25	ΠI	Register k	y May 18th	
9:00 AM- 5K Run/Walk Youth (12 years and					\$15		_	ntee a shirt.	
Adult (Pre-registra					\$20	H '			
		Day of regi	•		\$25				
Make checks payable to: Terre Haute Parks Department									
Send to: Torner Center, 500 S. Fruitridge Avenue, Terre Haute, IN 47803									
PLEASE READ AND SIGN BELOW BEFORE SUBMITTING ENTRY									
I know that running a road race is po medically able and properly trained, properly trained. I agree to abide by any official to deny or suspend my pabut not limited to: falls, contact with of the road, all such risks being know animals, and radio headsets are not and in consideration of your acceptal Parks and Recreation Department, it: Haute, its officials and employees, from a rise out of negligence or carele BE MAILED. In addition I agree to pa	and by my signature any decision of a carticipation for any other participants or and appreciated allowed in the race of entry, I for its employees, voluion all claims or liassness on the participant and claims or liassness on the participant and entry of the e	re, I certify that race official relative reason whatso is, the effects of it I by me. I under e and I will abide myself and anyonteers, all sponsibilities of any kit of the persons	I am medicative to any a sever. I assure weather, incorristand that be by this guidone entitled to sors, their regind arising or named in the	ally ablaspect of me all luding licycles deline. To act of me all ut of me is waive.	e to perform part risk associ high heat i, skatebo Having re on my beh tatives an y particip er. NO R	rm this of cicipation ated with and/or lands, balands and this vialf, waited attion in EFUNDS.	event, am in goon in this event, in this event, in this humidity, traffic by joggers, roller waiver and know we and release the sors including that is event, event.	d health, and am cluding the right of event including, and the conditions skates or blades, ring these facts, e Terre Haute he City of Terre though that liability	
Signature:				Date:					
Parent or legal guardian sig	gnature if und	der 18 years	s of age:	•					